HOUSE BILL 894

By Helton

AN ACT to amend Tennessee Code Annotated, Title 4; Title 8; Title 56; Title 63 and Title 68, relative to direct primary care.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Title 63, Chapter 1, Part 5, is amended by adding the following as a new section:

- (a) The department of finance and administration shall study the feasibility of adding direct primary care as a covered benefit under one (1) or more of the basic health plans approved by the state insurance committee for eligible state employees pursuant to title 8, chapter 27, part 2. The study must be actuarially based and include an examination of any:
 - (1) Legal barriers or restrictions that could prevent the state from
 providing direct primary care as a covered benefit to state employees under one
 (1) or more of the basic health plans approved by the state insurance committee,
 and whether the legal barriers or restrictions may be addressed through state
 legislative action or would require federal action;
 - (2) Estimated cost savings to the state if direct primary care is added as a covered benefit under one (1) or more of the basic health plans approved by the state insurance committee for eligible state employees;
 - (3) Benefits to physicians, patients, and insurers as a result of direct primary care, and whether similar outcomes could be realized by the state and state employees if direct primary care is added as a covered benefit under one

- (1) or more of the basic health plans approved by the state insurance committee for eligible state employees; and
- (4) Other information relevant to direct primary care in this state that could assist the state in evaluating its effectiveness and benefits.
- (b) The department may request assistance from other state agencies in conducting the feasibility study. All state agencies shall, upon request, assist the department in conducting the feasibility study.
- (c) The department shall report its findings and recommendations to the governor, the speaker of the senate, the speaker of the house of representatives, the chair of the health and welfare committee of the senate, the chair of the health committee of the house of representatives, and each member of the state insurance committee no later than December 31, 2019.

SECTION 2. This act shall take effect upon becoming a law, the public welfare requiring

it.